## PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 NOV 1 3 2000 Alexandria, Virginia 22313-1450 (571)-273-2885 or Fax INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further of the control of the current correspondence address as indicated unless corrected below of directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee polifications. maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 136 7590 08/25/2008 Certificate of Mailing or Transmission JACOBSON HOLMAN PLLC I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 400 SEVENTH STREET N.W. SUITE 600 WASHINGTON, DC 20004 (Depositor's nam (Signature ATTORNEY DOCKET NO CONFIRMATION NO. FILING DATE FIRST NAMED INVENTOR APPLICATION NO. P71446US0 7831 10/593.092 09/15/2006 Hiroki Matsui TITLE OF INVENTION: SEALING DEVICE WITH ROTATION DETECTING ELEMENT PREV. PAID ISSUE FEE DATE DUE TOTAL FEE(S) DUE ISSUE FEE DUE PUBLICATION FEE DUE APPLN. TYPE SMALL ENTITY 19/14/2008 SKOHAMM1 00000096 10593092 11/25/2008 \$300 nonprovisional NO \$1510 ART UNIT CLASS-SUBCLASS EXAMINER 01 FC:1501 1510.00 OP 02 FC:1504 277-317000 PICKARD, ALISON K 3676 300.00 OP 2. For printing on the patent front page, list 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). JACOBSON HOLMAN PLLC (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE NOK CORPORATION Tokyo, Japan

Please check the appropriate assignee category or categories (will not be	printed on the patent):
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Date 13 November 2008

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